

I-Reach 2 INC.
STRATEGIC PLAN 2015-2017

Mission Statement: Our mission is to provide high quality, innovative, individualized, therapeutic services to adults with developmental disabilities or brain injuries.

Vision: Providing premier services that promote quality of life, independence, and ability

Our Mission:

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Our Vision:

“Providing premier services that promote quality of life, independence, and ability.”

At I-Reach it is about PRIDE!

- **Passion:** Leaders who do all that we do from the heart
- **Respect:** Through our actions, we respect ourselves, our participants, our stakeholders, and our company.
- **Integrity :** Being honest and truthful ,following through on commitments and matching actions to your word
- **Dignity:** The unwavering commitment to uphold self-worth and respect
- **Education:** Providing the highest quality services through dynamic curriculum and real life experiences to develop competency and independence

95% of participants served by I-REACH 2 Inc. are funded through the State Division of Developmental Disabilities via what is known as the Medicaid Waiver program. The remaining 05% are on the waiting list for waiver services and are considered private pay. Rates are adjusted significantly to allow the participants to receive services and support as waiver clients do.

The individual’s team, including the guardian, individual served, Individual Case Manager, Direct Care Employees and other professionals or stakeholders decide which services the person is most in need of and also evaluates the progress and needs of the person served at least (2) times per year.

I-REACH 2 is one of several internationally certified and accredited CARF recognized (Commission for Accreditation of Rehabilitation Facilities) service providers in the State of Wyoming and across the world. Many of our services have been accredited since June of 2000 when I-REACH Inc. first received a three-year accreditation. We had our strongest survey to date in June of 2015.

This Strategic Plan is structured around 5 major goal areas with several objectives for each goal. Input was received through a variety of sources such as:

- Our participants
- Stakeholders, including case managers, guardians, business’s etc.
- I-REACH 2 Employees and board members.

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Our 5 major goal areas are:

1. Ensure stable and reliable funding
 - a) Preserve existing sources
 - b) Explore new sources
2. Recruit and retain professional and dedicated employees and volunteers
 - a) Recruiting efforts
 - b) Retention plans
 - c) Personnel development and succession efforts
3. Maintain and strengthen our presence in the community with identified stakeholders
 - a) Social media
 - b) Event Participation
 - c) Partnerships with Business
 - d) Government Leaders and Agency engagement
4. Provide the best possible services to our participants
 - a) Residential Care
 - b) Supported Employment
 - c) Community Integration
5. Maintain safe, efficient, and functional facilities , company vehicles, and technology
 - a) Maintenance Plan
 - b) Replacement Schedule
 - c) Ownership Plan

The administrative team and the board of directors will be using this plan as a roadmap to work towards fulfilling our mission, maintaining our vision, and from the top down and bottom living our core values. Along with our top goal of ensuring stable and reliable funding the following table represents a three (3) year resource development matrix that will allow us to work towards fulfillment of our mission, vision, and values.

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| Strategic Goal #1 ENSURE STABLE AND RELIABLE FUNDING | | | | | |
|---|--|--|--------------------------------|--|---|
| OBJECTIVE 1. Capture 95% of allocable Medicaid Waiver Units | | | | | |
| <i>Action Plan</i> | <i>Accountability</i> | <i>Resource Requirements</i> | <i>Metric</i> | <i>Planning Horizon & Deadline</i> | <i>KPI (Performance Target)</i> |
| Monitor monthly billing units | Administrative Coordinator | Therap | Therap and Excel Tracking data | Monthly | 8% of annual plan per month. |
| Complete Billing Audits | Service Coordinator Reassigned to Admin Coord 9/2016 | Therap and Billing sheets | Therap/ACS unit counts | Two per year/per participant | 95% of allocable billing |
| Monitor usage and follow up from administrative personnel regarding staffing, service adjustments etc | Executive Director | Financial reports from QuickBooks. Billing reports from Therap | Budget Reports, Therap | Ongoing | 95% plan usage per individual/per year. |
| <i>Comments/Notes</i> | <p>The leadership continues to refine the billing audit process with the activities being implemented consistently in 2016 and ongoing. Due to increased numbers of persons served, Medicaid revenue is up approximately 14% as of 9/30/15. September 2016: Billing audit duties have been reassigned to administrative staff audits are scheduled to be current by Nov. 16 December 2017-there have been 2 rate increases in 2017 that has generated additional revenue but with those changes individual IBA's were adjusted 2 times making it very difficult to calculate the exact rate of billing capture. In addition, we will be monitoring our billing audit process and related billing benchmarks in our upcoming strategic and risk management plans.</p> | | | | |

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| OBJECTIVE 2. Maintain and grow annual fundraising event. | | | | | |
|---|---|--|-------------------------|--|------------------------------------|
| <i>Action Plan</i> | <i>Accountability</i> | <i>Resource Requirements</i> | <i>Metric</i> | <i>Planning Horizon & Deadline</i> | <i>KPI/ (Performance Target)</i> |
| Planning Committee Meeting | Executive Director | Time | IR4 Art Excel Worksheet | January of each year | Meeting held, decisions documented |
| Committee targets 5-10 new corporate donors | Executive Director | Time, seed money for early expenses | Financial reports | Jan-Jun of the year | Increase in corporate sponsorships |
| Fundraiser Held in August of each year | Executive Director | | Financial reports | Aug | 3% net increase in profit. |
| <i>Comments/Notes</i> | Fundraiser achieved goal for increasing profit margin. However, with the downturn in the economy corporate sponsors were down for 2015. March 2016: Fundraiser outcomes are being adjusted due to the significant downturn in the economy September 2016- As of this update annual event exceed the projected income target by 3% December 2017- Despite a sluggish economy our annual event continued to grow by approximately 3% | | | | |
| Strategic Goal #1 ENSURE STABLE AND RELIABLE FUNDING | | | | | |
| OBJECTIVE 3. Explore options for purchasing a franchise | | | | | |
| <i>Action Plan</i> | <i>Accountability</i> | <i>Resource Requirements</i> | <i>Metric</i> | <i>Planning Horizon & Deadline</i> | <i>KPI/ (Performance Target)</i> |
| Attend Franchising training through Source America | Executive Director | Workforce Development grants | Training logs | 2015 | Attendance at training |
| Develop a detailed implementation timeline | Executive Director Board of Directors | Will be developed after the completion of training | Timeline Developed | 2016 | Timeline developed |

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| Comments/Notes | This goal is being placed on hold until we fulfill facilities goals related to the CMS final rule of 2014 for Home and Community Based Services. September 2016- discontinued |
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OBJECTIVE 4. Maintain a minimum of 12 full-time waiver funded residential habilitation participants. (This objective is further expanded in strategic goal #4--Services)

| <i>Action Plan</i> | <i>Accountability</i> | <i>Resource Requirements</i> | <i>Metric</i> | <i>Planning Horizon & Deadline</i> |
|---|-----------------------|---|---|--|
| Maintain connections/networking with Case Managers to inform of potential openings | Service Coordinator | Time, community meetings, newsletters, | Financial reports Individual Service Plans | ongoing |
| Develop a more thorough Rental Agreement at IR2 owned residential sites to comply with CMS requirements | Executive Director | CMS guidance, Behavioral Health Division requirements | N/A | 2015 |

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| Comments/Notes | The Curtis Street facilities maintained this goal in 2015. Lease agreement developed and will be signed by individuals in service during 2016. March 2016 ; current census is at 11 following the transition of another individual into community based living in an apartment. September 2016 in order to meet HCBS setting standards, we relinquished one home and placed 5 individuals into community based residences that are not owned or leased by IR2. The 159 and 153 Curtis street properties now have 4 full-time and 2 part-time individuals living there. Lease agreements are slated to be signed in January 2017. December 2017 , this goal will be carried over to our next planning cycle. However, we did accept into services 2 new waiver residential slots. |
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OBJECTIVE 5. Explore funding options through United Way and other corporate funding sources

| <i>Action Plan</i> | <i>Accountability</i> | <i>Resource Requirements</i> | <i>Metric</i> | <i>Planning Horizon & Deadline</i> | <i>KPI/ (Performance Target)</i> |
|---------------------------------|-----------------------|------------------------------|--------------------|--|-----------------------------------|
| Apply to be a United Way agency | Executive Director | Time | Agency application | 2015 | Acceptance as a United Way agency |

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|--|--------------------|--|----------------------------------|---------|---------------------------------|
| Explore ongoing funding through Baker-Hughes or other energy corporations in Casper. | Executive Director | Time, company contacts, | Meeting notes, financial reports | 2015 | See Resource Development Matrix |
| Maintain funding through current community resources | Executive Director | Volunteers for API, Nic Fest, Events Center. | Financial Reports | ongoing | See Resource Development Matrix |

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| <i>Comments/Notes</i> | <ul style="list-style-type: none"> • United Way grant for 2016-17 funding cycle submitted 10/28 to support Community Integration activities. • Moser Energy came onboard as a 2016 corporate sponsor for annual event. • March/September 2016: Selected as a United Way agency for 2 year funding cycle to support community integration programs. Also selected as recipient of the Two-Fly Foundation annual fundraiser. Two Fly generated 56k in revenue. Thankful Thursday event raised 5k more than originally projected. December 2017-received another 2-year funding grant from United Way, received a large bequest for a new office space that was purchased in September. With the passage of tax reform we will be looking more closely at corporate donors for a source of additional revenue. |
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OBJECTIVE 6.—INTENTIONALLY LEFT BLANK FOR EXPANSION OF THE PLAN

| <i>Action Plan</i> | <i>Accountability</i> | <i>Resource Requirements</i> | <i>Metric</i> | <i>Planning Horizon & Deadline</i> | <i>KP/ (Performance Target)</i> |
|-----------------------|-----------------------|------------------------------|---------------|--|---------------------------------|
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| <i>Comments/Notes</i> | | | | | |

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STRATEGIC GOAL 2: Recruit and retain professional and dedicated employees and volunteers

OBJECTIVE 1. Increase employee retention rates

| <i>Action Plan</i> | <i>Accountability</i> | <i>Resource Requirements</i> | <i>Metric</i> | <i>Planning Horizon & Deadline</i> | <i>KP/ (Performance Target)</i> |
|--|--|--|--|--|---------------------------------|
| Develop a mentor program for new staff | Administrative Team | Fiscal resources to compensate mentors a small stipend | Meeting Minutes, | 2015 | Turnover rate reduced by 2-5% |
| Increase staff recognition activities to increase moral | Program Coordinators/Managers | Fiscal, time, | Employee satisfaction survey to measure overall satisfaction | 2015 and ongoing | Turnover rate reduced by 2-5% |
| Explore options for training opportunities with Casper College | Executive Director Board of Directors | Financial support, College staff | Transcripts, training logs | 2016 | |
| <i>Comments/Notes</i> | <p>Direct Support staff was recognized in October with a recognition lunch and gift cards, Quality improvement committee planned and hosted summer picnic for staff and program participants. Team Lead system developed and put into place in October of 2015.</p> <p>March 2016: 15 staff will be participating in training through the College of Direct Support. This is a free training provided by the Behavioral Health Division. All staff were given bonuses ranging from \$25-300 at annual Christmas Party. Team lead implementation has resulted in significantly lower rates of missed documentation at the residential sites and have increased mentoring opportunities. Official mentor program not implemented at this time. December 2016 IR2 was able to provide approx. 36k in staff incentives/bonuses this fiscal year. . We have paid for College coursework for one staff person. 2015 turnover was approx. 15%, 2016 was 19%. Turnover in 2016 was impacted due to stricter enforcement of our attendance and documentation policies. Satisfaction rates have remained steady during 2015 and 16 at around 98% overall satisfaction. December 2017-IR2 gave 1.5% bonuses and 1.5% raises in early 2017. Employees were also provided a variety of training opportunities as well as longevity bonuses . Despite this we have noted a significant rise in turnover this year and will continue to work towards strategies to reduce this in the next planning cycle.</p> | | | | |

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| OBJECTIVE 2. Explore Options to provide health insurance and other benefits | | | | | |
|--|---|---|-----------------------|--|---------------------------------|
| <i>Action Plan</i> | <i>Accountability</i> | <i>Resource Requirements</i> | <i>Metric</i> | <i>Planning Horizon & Deadline</i> | <i>KP/ (Performance Target)</i> |
| Meet annually with insurance carriers and other benefit carriers | Executive Director | Time | Meeting notes | 2015 and ongoing | |
| Host an enrollment training for the Affordable Care Act | Business Manager | | Meeting minutes | 2015 and ongoing | |
| Monitor Employer Mandates/requirements under the ACA | Business Manager | SHRM, Healthcare.gov, | N/A | | |
| <i>Comments/Notes</i> | March 2016: No status updates to report | | | | |
| OBJECTIVE 3. Strengthen staff training/development including succession training opportunities | | | | | |
| <i>Action Plan</i> | <i>Accountability</i> | <i>Resource Requirements</i> | <i>Metric</i> | <i>Planning Horizon & Deadline</i> | <i>KP/ (Performance Target)</i> |
| Conduct an employee training survey | Executive Director | Survey | Survey Results | 2015 and ongoing | 75% of surveys returned. |
| Provide training opportunities for job coaches and day staff to meet DDD training requirements | Executive Director | Workforce grants, relevant training opportunities | Training logs | 2015 and ongoing | Ongoing DDD/CARF accreditation |
| Utilize Board members for content specific trainings | Executive Director | | Training logs/minutes | 2015 and ongoing | 1 board hosted training/year |

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| <i>Comments/Notes</i> | <p>Board president attended a staff meeting to gather employee input into the overall direction of the organization and performance of ED. 3 staff attended MEGA conference, 5 staff attended Employment Discovery training, 1 staff earned a statewide Job Coach/Supported Employment Certificate, 5 staff attending Person Centered Thinking training. Workforce grants not utilized as the program is out of money as of this update.</p> <p>Employee training survey is in progress. Dec 16-this has not been completed yet.</p> <p>March 2016 15 staff will be participating in training through the College of Direct Support. This is a free training provided by the Behavioral Health Division. All staff were given bonuses ranging from \$25-300 at annual Christmas Party No other status updates to report. December 2016 5 staff attended MEGA, 3 staff attended Employment First Summit, 2 staff attended Leadership Foundations, 2 staff attended the Six State Disability Summit, 1 staff attended the national APSE conference. 6 staff attended Person-Centered Thinking, 1 job coach obtained WEST certification. We have not scheduled a board member hosted training, this is slated for 2017. December 2017- 8 additional Direct Support Professionals received Person-Centered Thinking training, we provided funds for an admin staff to become CPI credentialed. Staff also attended trainings sponsored by the Wyoming Governors Council on Developmental disabilities.</p> |
|-----------------------|---|

| STRATEGIC GOAL 3: Maintain and strengthen our presence in the community with identified stakeholders | | | | | |
|--|--|--|-------------------------|--|------------------------------------|
| OBJECTIVE 1. Social Media | | | | | |
| <i>Action Plan</i> | <i>Accountability</i> | <i>Resource Requirements</i> | <i>Metric</i> | <i>Planning Horizon & Deadline</i> | <i>KP/ (Performance Target)</i> |
| Continue to use social media sites as a portal for advocacy and program awareness | Service Coordinator Executive Director Administrative Specialist | Internet connections, computers, staff | Weekly facebook reports | 2015 and ongoing | Increase in social media followers |

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| Revamp the IR2 website to include a portal to sell items crafted by Day Services participants. | Service Coordinator Executive Director Administrative Specialist | Computer expertise, fiscal resources | Increased web traffic—baseline taken during 1 st year | 2015 and ongoing | Completed website that is disability friendly, in years following revamp, increased followers by 15% annually. |
| Highlight identified stakeholders in program newsletters, Facebook, and website | Service Coordinator Executive Director Administrative Specialist | Time, internet connections, computers | Number of stakeholders promoted through media outlets | 2015 and ongoing | 36 recognition activities |
| <i>Comments/Notes</i> | Social media continues to see increased traffic and interactions. Other action plans will be rolled into upcoming years. March 2016 —No status updates to report. IR2 had a major technology infrastructure crash in January of 2016. We are getting our workgroup server replaced in April of 2016. The administration recognizes the need to become a great presence in the digital world and will explore different strategies in the coming months. December 2016 -2 staff engaged in a 6 week Social Media webinar course, website development is budgeted for 2017. We have implemented ongoing social media posts that highlight our paid employment and volunteer employment programs. December 2017 -Our social media presence continues to grow. We held a Facebook fundraiser on Giving Tuesday that exceed its goal, we need to increase our consistency in highlighting stakeholders throughout all of our communication channels. | | | | |
| OBJECTIVE 2. Event Participation | | | | | |
| <i>Action Plan</i> | <i>Accountability</i> | <i>Resource Requirements</i> | <i>Metric</i> | <i>Planning Horizon & Deadline</i> | <i>KP/ (Performance Target)</i> |
| Participate in a monthly community volunteer activity | Residential Manager Day Services Manager | Available activities, staff and participants, transportation | Participant volunteer timesheets | 2015 and ongoing | 1 event per month |
| Support activities during disability awareness month in March of each year | Service Coordinator | Available funds, staff | Media releases, financials, | 2015 and ongoing | 2-4 activities/year |

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|--|---|----------------------------------|-------------------------------------|--|--|
| <i>Comments/Notes</i> | Participation in monthly activities has not happened on a consistent basis, but we have carved out more volunteer work opportunities for the persons served. | | | | |
| | A “day of service” was held in our organization in March as part of disability awareness month. It was well received by staff, agencies served and leadership. We also assisted in delivering the annual disability awareness balloons. | | | | |
| | March 2016 Day of Service for 2016 was cancelled due to snow. No other activities occurred. Newsletter in March highlighted disability awareness month. December 2017-no updates to report. | | | | |
| OBJECTIVE 3. Increase networking and partnerships with businesses and local governmental agencies | | | | | |
| <i>Action Plan</i> | <i>Accountability</i> | <i>Resource Requirements</i> | <i>Metric</i> | <i>Planning Horizon & Deadline</i> | <i>KP/ (Performance Target)</i> |
| Increase participation with the Casper Area Chamber of Commerce | Executive Director Service Coordinator Board Members | Annual Dues | N/A | 2015 and ongoing | 3 chamber events/year |
| Explore options for membership in local service organizations | Executive Director | Board support, financial support | Fiscal records, meeting attendance, | 2016 | Increased stakeholder support by 5% annually |
| Increase engagement with elected officials | Executive Director | Board support, financial support | N/A | 2015 and ongoing | Contact notes |
| <i>Comments/Notes</i> | 3 chamber events completed by the Executive Director, Service Coordinator, and Business Manager. The Service Coordinator and Executive Director have attended legislative committee meetings for issues relative to our organization. In addition, the Service Coordinator was appointed to the Wyoming State Independent Living council and the Executive Director was appointed to the Wyoming Governor’s Council on Developmental Disabilities. | | | | |
| | December 2016 -Leadership continues to participate in chamber events. ED, Business Mgr and Community Employment coordinator each have had increased interactions with elected officials. In addition, leadership also attended legislative meetings of Joint Labor and Health committee on at least an annual basis. ED attended Rotary with Board chair in December of 2016, we will continue to explore this option. December 2017-No updated to report | | | | |

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| OBJECTIVE 1. Day Services | | | | | |
|---|--|---|--|--|---|
| <i>Action Plan</i> | <i>Accountability</i> | <i>Resource Requirements</i> | <i>Metric</i> | <i>Planning Horizon & Deadline</i> | <i>KP/ (Performance Target)</i> |
| Develop a job development class for staff. | Day Services Manager, Employment Specialist | 30 Ways to Shine, ACRE curriculum , Skills to Pay the Bills | Training logs, meeting notes, certificates of completion certificates. | 2015 | 80% of day services staff pass the course. |
| Implement the job development class for participants | Day Services Manager Direct Care staff | 30 Ways to Shine, ACRE curriculum , Skills to Pay the Bills | Training logs, meeting notes, certificates of completion certificates. | 2016 | 15% of program participants expressing an interest in working from employment survey pass the course. |
| Create 2-3 in-house activities (photography, sewing, etc) that can generate revenue for community integration activities. | Day Services Mangers, staff | Pinterest, donations to support the classes, website | QB reports, classroom schedules | 2016 | Items sold |
| <i>Comments/Notes</i> | <p>December 2016—job development class completed for staff and participants. Objective 3 is not being implemented since we are receiving grant money from United Way to support CI activities. In addition, objective 3 is a questionable activity in light of the new HCBS standards. Please see Performance Indicators for continued documentation on Services activities and goals. December 2017- No updates to report due to our increased attention this year on meeting new regulations under the HCBS settings rule.</p> | | | | |
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| OBJECTIVE2. Residential Services | | | | | |
|---|--|---|---|--|--|
| <i>Action Plan</i> | <i>Accountability</i> | <i>Resource Requirements</i> | <i>Metric</i> | <i>Planning Horizon & Deadline</i> | <i>KP/ (Performance Target)</i> |
| Strengthen tracking of Health/Medical needs for our participants. | Administrative Specialist (participant support) Executive Director | Therap, staff training, | Therap reports, training logs | 2015 | Health related data available in Therap. |
| Increase access to cultural, educational, recreational activities | Residential Managers Service Coordinator | Transportation, money, staff | Activity calendars, cash transaction logs | 2016 (15 will be the baseline year) | 2 activities per month starting in 2016. |
| Decrease the number of Dr. visits/year beyond- routine check-ups | Residential Managers Service Coordinator | Grocery funds, activity funds, guardian support | Financial reports, Dr. reports | 2015 and ongoing | 2015 baseline year, decrease of 5% moving forward. |
| <i>Comments/Notes</i> | <p>December 2016-In 2015, the total activities performed by the residential participants was 1,469 (Cultural=196, Educational=45, and Recreational=1,228). Cultural activities consisted of community tours, fundraising opportunities, and cultural experiences. Educational activities consisted of work experiences and volunteer opportunities. Recreational activities consisted of shopping, fitness, outdoor recreation, sporting events, movies, and restaurants. In 2016, the total activities performed by the residential participants was 2,098 (Cultural=291, Educational=85, and Recreational=1,722). This was an increase of 629 activities for the year and an average of 174 activities a month.</p> <p>Routine appointments are classified as physicals, psychiatry, dental, podiatry, otolaryngology, and ophthalmology. In 2015, the total number of appointments was 133 with 36 being non-routine. In 2016, the total number of appointments was 152 with 80 being non-routine. This was an increase of 44 appointments.</p> <p>Since 2015, all health related appointments for our participants have been entered and tracked in Therap to maintain health and wellness December 2017-all of the aforementioned activities have seen positive outcomes this year. More detailed information will be included in our annual performance analysis and year-end United Way report.</p> | | | | |

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STRATEGIC GOAL 4: Provide the best possible services for all program participants—*Please note effective 1/1/2017 IR2 will no longer track services goals via the strategic plan. We are eliminating the duplication and tracking all service goals in our annual performance indicators.*

OBJECTIVE 3: Supported Employment

| <i>Action Plan</i> | <i>Accountability</i> | <i>Resource Requirements</i> | <i>Metric</i> | <i>Planning Horizon & Deadline</i> | <i>KP/ (Performance Target)</i> |
|---|--|--|---|--|--|
| Develop and conduct a survey of program participants who want to work in the community. | Service Coordinator | Complete employment packet for each individual. | Survey results. | 2015 | 90% of participants take survey |
| Increase contacts with Casper area employers who support employment opportunities for our participants. | Service Coordinator Employment Specialist Executive Director | Wyoming Governors Council, employment grants, current DVR vendors. | Documented employer contacts, see actions plans in stakeholder section. | 2015 and ongoing | Increased community placements by 2% year. |
| As the supported employment program grows, hire additional employment specialists | Service Coordinator | Workforce grants for training, fiscal resources | Number of DVR referrals, internal placements | 2016 | Increase in numbers of individuals receiving employment services. Increase in the number of supported employment units |
| <i>Comments/Notes</i> | December 2016— Survey completed, We had 30 documented employer contacts and we placed and/or supported 6 individuals who secured new integrated community-based employment. The placement rate has increased 13% in 2016. | | | | |

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| GOAL 5: Maintain safe, efficient, and functional facilities , company vehicles, and technology | | | | | |
|---|--|--|-----------------------------|--|--|
| OBJECTIVE 1. Maintenance Schedule | | | | | |
| <i>Action Plan</i> | <i>Accountability</i> | <i>Resource Requirements</i> | <i>Metric</i> | <i>Planning Horizon & Deadline</i> | <i>KP/ (Performance Target)</i> |
| Develop a comprehensive maintenance schedule for all facilities | Executive Director | Persons with expertise in maintenance | | 2016 | Scheduled completed |
| Maintain a comprehensive inventory for all sites. | Executive Director | Time | | 2016 | Inventory completed |
| Implement the maintenance schedule | Executive Director | Fiscal resources, maintenance personnel. | Work orders, fiscal reports | 2017 | Reduction in maintenance costs by 10% over 3 years |
| <i>Comments/Notes</i> | <div style="display: flex; justify-content: space-between;"> March 2016-No status updates December 2017-no reportable updates. </div> | | | | |
| OBJECTIVE 2. Replacement Plans | | | | | |
| <i>Action Plan</i> | <i>Accountability</i> | <i>Resource Requirements</i> | <i>Metric</i> | <i>Planning Horizon & Deadline</i> | <i>KP/ (Performance Target)</i> |
| Explore options to replace in-house server with a cloud based solution | Executive Director | Fiscal resources, staff capacity | Bids from cloud vendors | 2015 | Cloud vendor selected |

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| Reduce employee mileage costs by leasing/purchasing additional program vehicles | Executive Director | Fiscal resources | Purchase orders, mileage logs, QB reports | 2015 | Reduced mileage reimbursements |
| Replace 2-3 computers/tablets per year | Executive Director | Fiscal resources | QB reports | 2015 | Same as action plan |
| <i>Comments/Notes</i> | Purchase of two vehicles was completed in June of 2015. Employee mileage is down 26% as September 30: | | | | |
| | March 2016 New server install to occur in April of 2015. Cloud solution not viable at this time. Administrative team all have access to One Drive with new Office subscriptions. 6 computers purchased in December of 2015. | | | | |
| | December 2016 -2 more program vehicles purchased, 1 computer purchased, new copier leased that has allowed us to bring our color printing needs in-house. | | | | |
| | December 2017 -4 Chromebooks and 1 laptop were purchased in 2017 along with another program vehicle. | | | | |
| OBJECTIVE 3. Ownership Plans | | | | | |
| <i>Action Plan</i> | <i>Accountability</i> | <i>Resource Requirements</i> | <i>Metric</i> | <i>Planning Horizon & Deadline</i> | <i>KP/ (Performance Target)</i> |
| Submit CDBG grant to purchase Harmony House | Service Coordinator Executive Director | \$9,000 for a 3% down payment | Grant application | 2015 | Grant awarded |
| Explore options to relocate Day Service Facility. | Executive Director | Attorney to evaluate lease, available spaces | Attorney notes, available properties | 2016 | Relocated facility by 12/17 |
| Refinance current mortgage on Serenity to reduce interest rate and mortgage maturity | Executive Director | Banking resources | Mortgage documents | 2015 | Fiscal reports, mortgage |
| <i>Comments/Notes</i> | There is no longer CDBG program funds to secure the Harmony House purchase. Mortgage refinance completed. Facility relocation status is undetermined. March 2016 No other status updates at this time December 2017 - In September of 2017 we purchased and began the renovation process at 351 N. Lennox. This will be our permanent home for our administrative offices, community integration and supported employment programs. | | | | |

I-Reach 2 INC.
STRATEGIC PLAN 2015-2017

Mission Statement: *Our mission is to provide high quality, innovative, individualized, therapeutic services to adults with developmental disabilities or brain injuries.*

Vision: *Providing premier services that promote quality of life, independence, and ability*